

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Squire Patton Boggs Political Action Committee (Squire Patton Boggs PAC)

ADDRESS (number and street) ▼

2550 M Street N.W.

☐ Check if different than previously reported. (ACC)

Washington

DC

20037

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00401083

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer William J. Ryan

Signature of Treasurer

William J. Ryan

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Squire Patton Boggs Political Action Committee (Squire Patton Boggs PAC)

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 16 / 2014 To: M M / D D / Y Y Y Y 11 / 24 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y</span> 2014		<span style="border: 1px solid black; padding: 2px;">113809.58</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">65827.10</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">13111.99</span>	<span style="border: 1px solid black; padding: 2px;">36641.99</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">78939.09</span>	<span style="border: 1px solid black; padding: 2px;">150451.57</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">16541.29</span>	<span style="border: 1px solid black; padding: 2px;">88053.77</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">62397.80</span>	<span style="border: 1px solid black; padding: 2px;">62397.80</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Squire Patton Boggs Political Action Committee (Squire Patton Boggs PAC)

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
10 16 2014

To:

M M / D D / Y Y Y Y  
11 24 2014**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

10611.99

34141.99

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

10611.99

34141.99

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

2500.00

2500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

13111.99

36641.99

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

13111.99

36641.99

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

13111.99

36641.99

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	41.29	2553.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	41.29	2553.77
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10500.00	79500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	6000.00	6000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	16541.29	88053.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16541.29	88053.77

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	13111.99	36641.99
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13111.99	36641.99
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	41.29	2553.77
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	41.29	2553.77

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Squire Patton Boggs Political Action Committee (Squire Patton Boggs PAC)**

Full Name (Last, First, Middle Initial)

**A. Matthew Cutts**

Mailing Address 2550 M Street N.W.

City  
Washington

State Zip Code  
DC 20037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Patton Boggs LLP

Occupation

Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

10 / 23 / 2014

Transaction ID : SA11AI.9252

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. Matthew Cutts**

Mailing Address 2550 M Street N.W.

City  
Washington

State Zip Code  
DC 20037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Patton Boggs LLP

Occupation

Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

11 / 20 / 2014

Transaction ID : SA11AI.9256

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. Mr. John J. Deschauer Jr.**

Mailing Address 2550 M Street N.W.

City  
Washington

State Zip Code  
DC 20037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Patton Boggs LLP

Occupation

Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

10 / 23 / 2014

Transaction ID : SA11AI.9250

Amount of Each Receipt this Period

3000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**Squire Patton Boggs Political Action Committee (Squire Patton Boggs PAC)**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael Forshey**

Mailing Address 2550 M Street, N.W.

City  
Washington

State Zip Code  
DC 20037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Patton Boggs LLP

Occupation

Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

83.33

Date of Receipt

11 / 06 / 2014

Transaction ID : SA11AI.9255

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

**B. Mr. Michael Forshey**

Mailing Address 2550 M Street, N.W.

City  
Washington

State Zip Code  
DC 20037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Patton Boggs LLP

Occupation

Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

11 / 20 / 2014

Transaction ID : SA11AI.9260

Amount of Each Receipt this Period

166.66

Full Name (Last, First, Middle Initial)

**C. Robert Kapla**

Mailing Address 2550 M Street, NW

City  
Washington

State Zip Code  
DC 20037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Patton Boggs LLP

Occupation

Associate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 06 / 2014

Transaction ID : SA11AI.9254

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

499.99

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**Squire Patton Boggs Political Action Committee (Squire Patton Boggs PAC)**

Full Name (Last, First, Middle Initial)

**A. Robert Kapla**

Mailing Address 2550 M Street, NW

City  
Washington

State Zip Code  
DC 20037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Patton Boggs LLP

Occupation

Associate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 20 / 2014

**Transaction ID : SA11AI.9259**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Trent Lott**

Mailing Address 2550 M Street N.W.

City  
Washington

State Zip Code  
DC 20037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Squire Patton Boggs LLP

Occupation

Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 23 / 2014

**Transaction ID : SA11AI.9276**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Mr. Kevin O'Neill**

Mailing Address 2550 M Street NW

City  
Washington

State Zip Code  
DC 20037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Patton Boggs LLP

Occupation

Associate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 23 / 2014

**Transaction ID : SA11AI.9257**

Amount of Each Receipt this Period

556.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3556.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**Squire Patton Boggs Political Action Committee (Squire Patton Boggs PAC)**

Full Name (Last, First, Middle Initial)

**A. Mr. Kevin O'Neill**

Mailing Address 2550 M Street NW

City  
Washington

State Zip Code  
DC 20037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Patton Boggs LLP

Occupation

Associate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3892.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 06 / 2014

**Transaction ID : SA11AI.9253**

Amount of Each Receipt this Period

556.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

556.00

10611.99

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 15

(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Squire Patton Boggs Political Action Committee (Squire Patton Boggs PAC)**

Full Name (Last, First, Middle Initial)

## **A. New Republican Majority Fund**

Mailing Address P.O. Box 553176

City State Zip Code  
 Washington DC 20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 06 2014

**Transaction ID : SA11C.9279**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2500.00

2500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 15

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Squire Patton Boggs Political Action Committee (Squire Patton Boggs PAC)**

Full Name (Last, First, Middle Initial)

**A. Eagle Bank**

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
1	0		3	1		2	0	1	4		

Mailing Address 1850 K Street, NW

City	State	Zip Code
Washington	DC	20006

**Transaction ID : SB21B.9217**Purpose of Disbursement  
Bank Fees

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

41.29

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

41.29

41.29

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Squire Patton Boggs Political Action Committee (Squire Patton Boggs PAC)**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF DAN KILDEE**

Mailing Address P.O. BOX 248

City	State	Zip Code
FLINT	MI	48501

Purpose of Disbursement

011

Candidate Name

**FRIENDS OF DAN KILDEE**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: MI District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

**Transaction ID : SB23.9243**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF DAVE JOYCE**

Mailing Address 320 KENARDEN DRIVE

City	State	Zip Code
CLEVELAND	OH	44143

Purpose of Disbursement

011

Candidate Name

**FRIENDS OF DAVE JOYCE**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: OH District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

**Transaction ID : SB23.9234**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF PATRICK MURPHY**

Mailing Address 4521 PGA BLVD. #412

City	State	Zip Code
PALM BEACH GARDENS	FL	33418

Purpose of Disbursement

011

Candidate Name

**FRIENDS OF PATRICK MURPHY**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: FL District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2014

**Transaction ID : SB23.9265**

Amount of Each Disbursement this Period

1500.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Squire Patton Boggs Political Action Committee (Squire Patton Boggs PAC)**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF PATRICK MURPHY**

Mailing Address 4521 PGA BLVD. #412

City	State	Zip Code
PALM BEACH GARDENS	FL	33418

Purpose of Disbursement

011

Candidate Name

**FRIENDS OF PATRICK MURPHY**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: FL District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2014

**Transaction ID : SB23.9267**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. HUDSON FOR CONGRESS**

Mailing Address PO BOX 5053

City	State	Zip Code
CONCORD	NC	28027

Purpose of Disbursement

011

Candidate Name

**HUDSON FOR CONGRESS**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NC District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

**Transaction ID : SB23.9244**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. JIM RENACCI FOR CONGRESS**

Mailing Address 150 SMOKERISE DRIVE

City	State	Zip Code
WADSWORTH	OH	44281

Purpose of Disbursement

011

Candidate Name

**JIM RENACCI FOR CONGRESS**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: OH District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

**Transaction ID : SB23.9241**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Squire Patton Boggs Political Action Committee (Squire Patton Boggs PAC)**

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN PARTY OF FLORIDA**

Mailing Address 420 E. JEFFERSON STREET

City	State	Zip Code
TALLAHASSEE	FL	32301

Purpose of Disbursement

011

Candidate Name

**REPUBLICAN PARTY OF FLORIDA**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2014

**Transaction ID : SB23.9232**

Amount of Each Disbursement this Period

3000.00
---------

Full Name (Last, First, Middle Initial)

**B. STIVERS FOR CONGRESS**

Mailing Address 4679 WINTERSET DRIVE

City	State	Zip Code
COLUMBUS	OH	43220

Purpose of Disbursement

011

Candidate Name

**STIVERS FOR CONGRESS**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2014

**Transaction ID : SB23.9236**

Amount of Each Disbursement this Period

1000.00
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Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4000.00
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10500.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Squire Patton Boggs Political Action Committee (Squire Patton Boggs PAC)**

Full Name (Last, First, Middle Initial)

**A. Kasich Taylor For Ohio**

Mailing Address 211 South Fifth Street

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Contribution to Non-Federal Candidate

Candidate Name

**Kasich Taylor For Ohio**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2014

**Transaction ID : SB29.9270**

Amount of Each Disbursement this Period

1000.00
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Full Name (Last, First, Middle Initial)

**B. Mike Dewine for Ohio**

Mailing Address 2587 Conley Road

City	State	Zip Code
Cederville	OH	45314

Purpose of Disbursement  
Contribution to Non-Federal Candidate

Candidate Name

**Mike Dewine for Ohio**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2014

**Transaction ID : SB29.9273**

Amount of Each Disbursement this Period

5000.00
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Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6000.00
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6000.00
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